

**FORM 2015 – NEW PROGRAMS FOR CAREER SEMINAR SCHOOLS**

**No Fee**

**Currently licensed career seminar schools must complete this form for additional program licensure.**

NAME OF SCHOOL					
ADDRESS (LOCATION)					
CITY		STATE		ZIP	

1. List below in alphabetical order the program(s) you propose to offer, as well as the length and total cost of the program(s). (Total Cost = Registration Fee + Tuition)

2. Indicate if these programs are ☐ Clock Hours or ☐ Credit Hours

**(Lines will expand as needed)**

**ATTACH ADDITIONAL FORM 2015 PAGES AS NEEDED.**

Program Title	Length of Program	Registration Fee	Tuition	Total Cost

**STATEMENT OF COMPLIANCE**

Under penalty of perjury, I declare and affirm that the statements made on this form and any attached sheets are true, complete, and accurate.

Printed Name of Official		Title	
Signature of Official		Date	